



**Tuscaloosa VA Medical Center  
Psychology Internship Program  
MATCH Number: 217111**



**Applications Due:** November 24, 2023

**ACCREDITATION STATUS**

The Psychology Internship Training Program at Tuscaloosa VA Medical Center was established in 2011 and is fully accredited by the Commission on Accreditation (CoA) of the American Psychological Association. Questions related to the program's accreditation status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation  
American Psychological Association  
750 1<sup>st</sup> Street, NE  
Washington, DC 20002  
(202) 336-5979/email: [apaaccred@apa.org](mailto:apaaccred@apa.org)  
[www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

## LETTER FROM TRAINING DIRECTOR

Dear applicant,

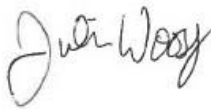
Thank you for your interest in our Internship Program at the Tuscaloosa VA Medical Center (TVAMC)! As a medical center primarily known for its mental health and psychiatric services, the TVAMC is an ideal place to complete your clinical and research internship training experiences. As you will see, we offer a variety of training experiences in various clinics with Veterans with different clinical presentations and needs. In addition to these clinical experiences, you will also have opportunities to further develop your skills as a researcher and leader.

As a program, we aspire to tailor your experiences to match your training needs so that you can reach your career goals. We strive to prepare you to be a competitive applicant for whichever path you choose (e.g., clinical postdoc, academia, entry level psychologist). Currently, we have 10 supervisors who take an active role in supervising, mentoring, and supporting you throughout your internship year to help you achieve your training and career goals. Many of our current supervisors are themselves graduates of our internship program.

Diversity, equity, and inclusion are highly valued at our internship program. Several of our internship supervisors are currently serving or have previously served on diversity committees in the medical center. We also have didactic trainings on an assortment of topics regarding diversity and inclusivity. Our goal is to ensure that every intern and supervisor feels welcomed and supported in our program.

To conclude, I hope you find this brochure filled with a wealth of helpful information in making this important decision and that you apply to complete your training with us. If you have any more questions about our site, please feel free to email me and I will be happy to answer any questions you may have.

Sincerely,



Julie Woosley, PhD  
Psychology Internship Training Director  
Tuscaloosa VA Medical Center  
Phone: (205) 554-2000, Ext. 2663  
Email: [julie.woosley@va.gov](mailto:julie.woosley@va.gov)

## **APPLICATION & SELECTION PROCEDURES**

### **Eligibility**

Candidates for the Tuscaloosa VA Medical Center (TVAMC) Psychology Internship Program must be U.S. citizens enrolled and in good standing at a clinical or counseling psychology graduate program accredited by the American Psychological Association (APA) or Canadian Psychological Association (CPA). Applicants must be certified by their Director of Clinical Training as being ready for internship and preferably will have only minor, if any, dissertation requirements remaining. We prefer that applicants have a minimum of 1000 total hours of practicum experience (e.g., intervention, assessment, supervision, support); however, the quality of previous training experiences is valued more highly than the quantity. Preference is typically given to candidates from university-based programs who have had supervised assessment and therapy experience with a broad range of psychopathology across varied adult populations and settings; supervised training in objective psychological or neuropsychological test administration, interpretation, and report writing; and demonstrated interest and experience in research. As an equal opportunity training program, the TVAMC internship considers applications from qualified candidates of all backgrounds. We welcome and strongly encourage applications from candidates reflecting diversity in racial, ethnic, religious, sexual orientation, gender, disability or other identity status.

### **Application Procedures**

Our internship is an APPIC member program. To apply, please visit the APPIC website ([www.appic.org](http://www.appic.org)) for instructions on how to complete the online APPIC Application for Psychology Internships (AAPI). Interested individuals who meet eligibility criteria should submit the following application materials:

- A cover letter indicating interests, including preferred rotations
- APPIC Application for Psychology Internships (AAPI Online)
- Curriculum Vitae
- Official graduate transcript(s)
- Standardized Reference Forms from three references

Instructions for the Applicant Agreement form required for the Match from the National Matching Services program can be downloaded at [www.natmatch.com/psychint](http://www.natmatch.com/psychint). Applicants who cannot access the web site should contact National Matching Services (NMS) directly to request instructions and registration forms.

**The deadline for submission of application materials is Friday, November 24, 2023.**

### **Candidate Interviews**

We have 4 full-time funded intern positions. Top candidates will be invited for interviews to take place in December and January. This application cycle, there will be 4 interview dates (2 in person & 2 virtual). Applicants who are invited for interviews will be informed of interview dates via email notification. Please be sure to indicate a daytime telephone number and current e-mail address in your application materials so you can be reached to schedule an interview. The interview day will include presentations about the program and rotations, individual interviews with

supervising faculty, and time to speak with current interns. Inquiries about the program and interview process should be directed to the Internship Training Director at [julie.woosley@va.gov](mailto:julie.woosley@va.gov). Applicants not selected to interview will be notified by December 15, 2023. Individuals not interviewed will not be considered for selection during the initial Match.

### **Selection**

The TVAMC Internship Program complies with all APPIC guidelines in the recruitment and selection of interns, and participates in the NMS Match program. We abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any internship applicant. A complete copy of APPIC policies and the matching program can be found at the APPIC website, [www.appic.org](http://www.appic.org).

Successful candidates will be contacted by electronic mail regarding preferences for rotation assignments, and will begin the Internship Program on July 1, 2024. Acceptance is contingent upon passing a routine physical examination and background security check. All birth-assigned males are also required to register with the selective service to be eligible for VA training programs. Additional information regarding VA trainee eligibility requirements is available at [https://www.va.gov/OAA/TQCVL/TQCVL\\_HPTInstructions\\_V1.pdf](https://www.va.gov/OAA/TQCVL/TQCVL_HPTInstructions_V1.pdf).

### **For additional information, contact:**

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### **PROGRAM DESCRIPTION**

The Tuscaloosa VA Medical Center Psychology Internship Program provides a one-year, full-time training experience for clinical and counseling psychology doctoral students from APA-, CPA-, or PCSAS- accredited programs. The program provides broad-based, generalist training in clinical assessment, psychotherapy, consultation, and research, with opportunities for focused training in PTSD, geropsychology, pain management, and integrated health/primary care.

Psychologists are highly active at the Tuscaloosa VAMC, serving in clinics addressing general mental health, substance use disorders, homelessness, PTSD, psychological assessment, neuropsychology, integrated health/primary care, geriatrics, and research. Psychology faculty take seriously their obligation to contribute to the development of well-rounded, competent clinical psychologists prepared for the independent practice of psychology. The internship training staff is supportive, highly available for consultation, and sincerely interested in interns' professional development.

### **Training Model and Program Philosophy**

Our program is committed to honoring the profound role of science in guiding clinical practice. We appreciate and promote the role of clinical science in providing the foundation for designing,

implementing, and evaluating assessments and interventions. While we place a strong emphasis on understanding the science base of psychology, our program most closely reflects a practitioner-scholar training model.

We formally integrate science and practice in many ways, including didactic seminars, case presentations of clinical care issues that are based on current empirical literature, participation in research activities during the internship year, and the use of empirically validated and supported assessment and clinical interventions. We provide interns with a variety of experiences that prepare them for postdoctoral training settings or entry level practice in clinical, research, or academic settings. Our training goals are consistent with the Tuscaloosa VA Medical Center's mission to provide quality care to Veterans while advancing state of the art services through research and education.

Psychology staff assume the responsibility to prepare interns for the clinical and ethical demands of a challenging career in psychology. A developmental model guides our training program as interns begin the program with close supervision, mentorship, and didactic instruction. As skills develop and mastery increases, interns gain increasing autonomy in their clinical work. Competencies in professional practice are developed through clinical practice, individual and group supervision, and didactic training.

The TVAMC recognizes the importance of cultural and individual differences in the training of psychologists. Thus, our policies, didactic training, supervision, and clinical work all strive to foster an understanding of the importance that diversity issues play in our work.

## **Program Aims**

Internship provides a year of intensive, supervised clinical training, intended as a bridge between graduate school and entry into the profession of psychology. The TVAMC Psychology Internship aims to train interns for careers in clinical settings (e.g., VA hospital, academic medical centers), academia, and as leaders in the field of psychology. The internship provides a generalist training to prepare interns for postdoctoral training or entry-level evidence-based professional practice in clinical psychology, in accordance with the following APA profession-wide competencies:

- Assessment
- Intervention
- Research
- Individual and Cultural Diversity
- Communication and Interpersonal Skills
- Consultation and Interprofessional/Interdisciplinary Skills
- Supervision
- Ethical and Legal Standards
- Professional Values and Attitudes

Clinical training experiences are designed to provide interns with opportunities to develop and demonstrate knowledge and skill pertaining to the above competency areas as they serve our nation's Veterans. To assist interns in developing their professional identity and competencies, experiential and didactic training opportunities are provided, typically emphasizing the needs of Veterans. Under the supervision of licensed clinical psychologists, interns provide direct clinical

services – including psychodiagnostic assessment and intervention – to a diverse population of Veterans. Interns are expected to understand and apply the scientific research literature and evidence basis for the services they provide and may also participate in research to contribute to further advancements in Veteran healthcare. Interns are expected to abide by ethical principles and applicable federal laws/policy, understand and attend to diversity issues, and conduct themselves professionally in all interactions with Veterans, families, and other professionals. In addition to monitoring intern practice and competency development, rotation supervisors serve as professional role models and advisors to assist interns in transitioning to professional practice.

## **Program Structure**

The internship year is structured to provide significant breadth of training by maximizing exposure to a wide range of experiences, while offering sufficient concentration to provide depth of learning and building of expertise. The required workweek is 40 hours, with interns spending at least 32 hours per week on their clinical rotations. We expect that interns will accrue on average 10-15 hours per week of direct face-to-face clinical contacts. The remaining time is devoted to didactic training, research, and administrative activities.

Interns participate in two six-month primary rotations. Each intern devotes three days per week to clinical training and supervision on the primary rotation. The other two days per week are at a secondary rotation, which occurs in a different clinical setting than the primary rotation. Interns also participate in group supervision, didactics, and other training opportunities during their two days on the secondary rotation. All interns are required to complete an assessment experience rotation in either Psychological Assessment (3 months) or Geropsychology (GEC) rotations for at least 6 months. If an intern completes a 6-month primary GEC rotation, that experience will count as their assessment experience. An intern can expect to complete 4 assessments in GEC and 6 assessments in the Psychological Assessment rotation. Interns are also required to participate in a 3-month secondary rotation conducting intakes in the Mental Health Outpatient Clinic. Secondary rotations (3 or 6 months) are intended to supplement the interns' experience by giving interns the opportunity to connect with a staff member with whom they would not otherwise have an opportunity to work, or to work with a different population or treatment modality than is available to them on their primary rotation. Because the internship places a particular emphasis on training psychologists who are well-rounded, the secondary rotation is often used to fill gaps in knowledge and/or skills. The secondary rotation is 2 days per week, including one hour of individual supervision with a licensed psychologist.

Final assignment of primary and secondary rotations takes into account the intern's expressed preferences, faculty and intern evaluation of the intern's training needs, and the availability of particular experiences and supervision. A list of currently available rotations is noted below. Please see the section titled Clinical Training Experiences for detailed rotation descriptions.

### **Primary Rotation Opportunities**

- Geropsychology (GEC)
- Health Behavior & Functional Restoration Pain Program
- OEF/OIF/OND Transition Center
- Primary Care-Mental Health Integration (PCMHI)
- Residential Rehabilitation Treatment Program (RRTP)

## **Secondary Rotation Opportunities**

- Administrative Leadership
- Geropsychology (GEC)
- Psychological Assessment
- Primary Care-Mental Health Integration (PCMHI)
- Research
- Residential Rehabilitation Treatment Program (RRTP)

## **Supervision**

Supervision is critical to the internship training process in all areas, including clinical service delivery, consultation, and research. In addition to the mandatory four hours of supervision each week, a significant amount of informal, impromptu supervision is also provided.

## **Evaluation**

Specific training needs and goals are elucidated through the development of individualized training plans that are consistent with the goals, objectives, and competencies of the broader training program. Informal progress is monitored on an ongoing basis and more formal evaluations are conducted at mid-point and the end of the training year. Copies of the mid-rotation and final evaluations are forwarded to the intern's graduate program. At any time that a significant problem in training progress requiring formal remediation is noted or an intern is at risk of being put on a formal remediation plan, the Director of Clinical Training (DCT) at the home institution will be notified. The minimum level of achievement to graduate from the internship program is a rating of 4 on every applicable item on the evaluation form of the final rotations of the internship year (i.e., rotation ends in June) and successfully pass 3 clinical case presentations by the end of the internship year. Copies of any subsequent remediation plans and outcomes will also be forwarded in accordance with the TVAMC policies and procedures that are included in the Training Manual.

## **Preceptors**

Each intern may select a preceptor for the training year. Preceptors are selected from available licensed staff who do not maintain supervisory responsibility for the intern. The role of the preceptor is that of a mentor in issues such as professional development and functioning. They may assist the intern in negotiating the internship year and planning for activities after training.

## **CLINICAL TRAINING EXPERIENCES**

Below is a list of rotations that are currently available. Selection of rotations requires approval of the Internship Training Director, Internship Training Committee, and supervisors.

### **Administrative Leadership (Secondary Rotation Only)** **Supervisors: Dr. Audrey Austin/Dr. Andrew Oakland**

This secondary only rotation aims to help prepare interns for administrative duties that may be part of their careers as psychologists. The rotation provides exposure to administrative, strategic, and performance improvement initiatives in the Mental Health Service Line. Interns will be

required to present a project or product (e.g., with data or a proposal) to the Internship Faculty at the end of the rotation.

“If you are interested in improving continuity of care and hospital efficiency and learning the role that psychologists play in these positions, then you will like this rotation.” -Previous Intern

### **Geropsychology (GEC)**

**Supervisor: Dr. Martin Morthland**

The geropsychology rotation blends teaching and practice, informed by science. The rotation includes furthering the intern’s knowledge and practice of evidence-based treatments to a unique and ever-growing older population. This is done in concert with the supervisor so that the intern grows in independence in applying a variety of psychotherapies for this population. An important component to this rotation is also the use of testing and assessment for neurocognitive disorders, informing differential diagnoses, degrees of capacity, and the application of therapy. This rotation allows the intern to perform cognitive assessments and to experience how the results are then applied clinically to the individual. The intern will have the experience of following older adult clients from assessment to practice. Interns in this rotation may also have the chance to participate in vertical supervision and gain supervision experience working with local practicum students.

“If you want to gain more experience working with patients suffering from serious mental illness such as psychotic disorders in addition to seeing how serious mental illness and compromised neurological functioning influence each other, then this is the rotation for you. There are ample opportunities to conduct therapy and psychological assessments while learning about the unique challenges of treating the Veteran geriatric population.”- Previous Intern

### **Functional Restoration Pain Program**

**Supervisor: Dr. Audrey Austin**

The primary focus of this rotation is training in evidence-based treatment for chronic pain and related comorbidities. Interns will provide Cognitive Behavioral Therapy for Chronic Pain (CBT-CP) and other psychotherapies for individuals and occasional groups, face-to-face or via telehealth technology when indicated. Interns will participate as part of an interdisciplinary team, working collaboratively with other medical providers and clinical staff to provide comprehensive pain management intervention. Additionally, interns will gain exposure to federal, state, and facility policy regarding pain management practice guidelines, use and management of prescription opioids, and implementation of risk management strategies through participation in related committees and clinical consultation.

“If you are looking to gain experience in pain perception and improving quality of life for those with chronic pain, FRPP is for you.”- Previous Intern



## **OEF/OIF/OND Transition Center**

### **Supervisor: Dr. Vincent (Tony) Intoccia**

The Transition Center is a post-deployment integrated care clinic serving recently returned Veterans from Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn. The Transition Center, based on the patient-centered medical home model, has been recognized as a “best practice” and has served as a model for VA facilities around the country working to develop coordinated, co-located care for newly returning Veterans. Interns will be involved in the assessment, coordination of care, and treatment of Veterans receiving care in this clinic. As such, interns will learn how to work collaboratively and efficiently within a multidisciplinary primary care setting. Interns will be afforded the opportunity to gain skill in effective consultation with medical team members, brief targeted assessment, and the provision of brief, evidenced-based psychotherapy for the treatment of anxiety and mood disorders.

Special emphasis will be placed on training and supervision of evidenced-based treatments, including Prolonged Exposure Therapy (PE), Acceptance and Commitment Therapy, and Cognitive Behavioral Therapy for depression, anxiety, and insomnia. This rotation places a specific focus on Prolonged Exposure for the treatment of combat and non-combat PTSD. Training mirrors the National Center for PTSD PE training for VA providers. This includes session-by-session review of the *Prolonged Exposure Therapy for PTSD* manual (Foa, Hembree, & Rothbaum, 2007), audio review of PE sessions, fidelity checklists for each session, and modeling as needed. Interns will also become adept at the common transition related challenges faced by Veterans and their families through the deployment cycle.

“If you are interested in learning more about trauma informed care, then the Transition Center is the place for you. You will work with Veterans who have recently returned from OEF/OIF deployments with a diverse array of experiences in their military service as well as learn the ins and outs of evidence-based psychotherapy such as prolonged exposure therapy (PE), anger & Irritability management skills (AIMS) and acceptance and commitment therapy (ACT).” – Previous Intern

## **Psychological Assessment**

### **Supervisor: Dr. Adriana Yon, ABPP-CN**

The Psychological Assessment and Testing Center (PATC) provides services to adult and geriatric inpatients and outpatients with a variety of psychiatric, medical, and neurological conditions. Questions regarding differential diagnosis of psychological disorders are typically posed to PATC staff. Many patients also have comorbid conditions such as substance abuse, depression, anxiety, severe mental illness, PTSD, and attentional/learning disorders. Assessment training available to interns primarily focuses on personality assessments that inform treatment planning. Interns are involved in all aspects of the assessment process including medical record review, test selection, clinical interview, test administration, test interpretation, report writing, and provision of feedback. There may be opportunities to conduct psychological evaluations remotely through use of telehealth technology. It should be noted that TVAMC does not provide formal neuropsychological training as delineated in the Houston Conference guidelines.

“If you enjoy complex psychological and neuropsychological evaluations spanning the young adult to geriatric range, then this rotation is for you.” – Previous Intern

### **Primary Care-Mental Health Integration (PC-MHI)**

**Supervisor: Dr. Tony Cross / Dr. Julie Woosley**

The Primary Care-Mental Health Integration (PCMHI) program is designed on an open access system platform with the primary function of providing direct access to same-day mental health services. This program is built on a population-based foundation and utilizes a stepped care approach to assessment, treatment, and referral. Within this program patients are seen in a brief patient self-management model, emphasizing screening and assessment, solution-focused brief behavioral and cognitive-behavioral interventions, and increasing exposure to steps of healthy lifestyle modification. Patients are most typically referred based on population-based screening for problematic alcohol use, depression, and post-traumatic stress disorder; however, patients may be referred and treated for a variety of behavioral health conditions as well (e.g., chronic pain, smoking cessation, medication adherence, and lifestyle modification). Interns will have the opportunity to provide group intervention for weight loss through co-facilitation of the VA weight management program, MOVE!

“If you enjoy working in a fast-paced environment where you can address the immediate needs of Veterans utilizing brief solution-focused interventions, then this rotation is for you.”- Previous Intern

### **Residential Rehabilitation Treatment Program (RRTP)**

**Supervisors: Dr. Caitlin Retterer/Dr. David MacVicar**

The RRTP is a 140-bed residential rehabilitation unit with several programs: PTSD, Substance Use Disorders, and Domiciliary Care for Homeless Veterans. Veterans typically stay as residents for approximately two months and engage in a variety of treatments during their stay. Interns on this rotation will have a variety of clinical exposures with a very diverse Veteran population. Veterans come from many service eras, all branches of service, with varied psychosocial histories. The most common problems seen on the unit are substance use disorders, PTSD, homelessness, and mood and anxiety disorders.

An intern’s clinical time is typically split among seeing individual patients, leading therapy groups, and conducting psychodiagnostic assessments. Interns on the unit also serve as an integral part of the multidisciplinary treatment team. RRTP staff includes case managers (RNs, social workers, and addictions therapists), psychiatrists, clinical pharmacists, nursing staff (nurse managers, RNs, LPNs, NAs), nurse practitioners, and dietitians, among others. Each intern is able to individualize their training plan depending on experience and interests, but overall focus is placed on learning evidence-based psychotherapy, particularly for PTSD. Interns in this rotation may also have the chance to participate in vertical supervision and gain supervision experience working with local practicum students.

“If you’re interested in PTSD and substance use treatment, then this rotation is for you.”- Previous Intern.

## Research

### Supervisor: Dr. Michelle Hilgeman

Excellence in research is an integral part of the Tuscaloosa VA Medical Center (TVAMC)'s mission.

The TVAMC serves approximately 16,000 unique Veterans and approximately 11% identify as women, 40% identify as a racial or ethnic minority (predominantly Black and African American Veterans), 18% have a diagnosis of PTSD, 60% have a psychiatric diagnosis, and over half live in a rural area. The types of research typically covered by the TVAMC Human Research Protection Program are applied clinical investigations of the cause, evaluation, assessment, treatment, or outcome of clinical medical and psychiatric illnesses. In addition, adaptation and implementation of evidence-based interventions is also a focus of several investigators. Studies are funded by the Veterans Affairs (Health Services Research & Development, Rehabilitation Research & Development, Cooperative Studies Programs, etc.), Department of Defense (DoD), the National Institutes of Health (NIH), and private industry. The research portfolio spans numerous ongoing mental health research studies focused on behavioral health and pharmaceutical treatment of post-traumatic stress disorder (PTSD), substance use disorders, major depression, serious mental illness, and dementia. For example, current and recent studies focus on: 1) mindfulness based stress reduction for PTSD or substance use disorders, 2) supported employment interventions for Veterans with PTSD, 3) rural health outreach initiatives, 4) genetic studies of Veterans with severe mental illness, 5) mixed-methods investigations of person-centered care best practices in the Community Living Centers, 6) Montessori-based approaches for Veterans with dementia, 7) COPD drug investigations, and 9) interventions for opioid use disorders, among others (e.g., sleep in community nursing homes). Best practices developed at the Tuscaloosa VAMC have been adopted enterprise-wide for dissemination by the Offices of Mental Health & Suicide Prevention and Geriatrics & Extended Care Services.

The Tuscaloosa VA Medical Center is also one of more than 34 **VA Innovation Network Sites** around the country. The Innovation Ecosystem funds clinical pilot programs that allow front-line clinicians to develop innovative practices through a Human-Centered Design approach. Recent interns have participated in the development of grant proposals, program evaluation, and dissemination of findings both within and outside of the VA Healthcare System. The Diffusion of Excellence, also organized under the VA Innovation Ecosystem, also supports best practices including work supported by the Tuscaloosa VA Medical Center. For more information about the Innovation Ecosystem in VA, check out: [2021 iNET Annual Report \(va.gov\)](#)

The TVAMC Research Service, under the direction of Lori L. Davis, M.D., has a well-established infrastructure that includes an independent IRB that has been accredited by the Association for the Accreditation of Human Research Protection Programs, Inc. (AAHRPP) and an independent full-time research compliance officer. The TVAMC has an affiliated nonprofit research corporation, called **Tuscaloosa Research and Education Advancement Corporation (TREAC)**, that has administered pharmaceutical industry, NIMH, and Department of Defense funding and contracts. Formal partnerships with The University of Alabama, The University of Alabama at Birmingham (UAB), and the Birmingham VA Research Department, are also in place. The Research Office Space is a newly renovated suite including numerous private clinical research offices, a waiting room, a large data management center with cubicle workstations, and

a research conference room. The research team maintains VA Pulse pages for many of its active programs, has a shared drive on the TVAMC server, and manages IRB submissions via an online service called IRBNet ([www.irbnet.org](http://www.irbnet.org)).

### **Individualized Research Rotations at TVAMC:**

All interns are invited – but not required – to participate in research activities throughout the training year or for either of the six-month blocks (fall or spring rotations). At the beginning of each training year, research investigators do an initial “open house” for incoming interns to describe opportunities to join ongoing studies, quality improvement initiatives, or grant submissions. The supervisor and intern negotiate expectations and make sure the intern doesn’t take on too much and that available time and expectations are a good match.

Interns who elect to participate in a Research Rotation are offered one of several options (described below). A secondary rotation (1.5 day a week) in Research may be a particularly good fit for interns who anticipate retaining a focus on research in their future career.

**Dr. Michelle Hilgeman** ([Michelle.Hilgeman@va.gov](mailto:Michelle.Hilgeman@va.gov), 205-799-5280), serves as the Coordinator for the Research Rotation and is available to meet individually with each intern to discuss research interests and possible “matches” with TVAMC Research Staff and Clinicians with ongoing projects. Dr. Hilgeman is a full-time researcher at the Tuscaloosa VA with 43 peer-reviewed publications and almost 150 presentations and has had continuous external support for her work for more than 12 years totaling more than 5.6 million dollars in research and clinical demonstration grants.

### **If you chose to participate in the Research Rotations, you will:**

- Develop **individualized research goals** in collaboration with Dr. Hilgeman and/or an identified Research Mentor (e.g., Davis, Pilkinton, Snow, Hilgeman, MacVicar, Mumba).
- Decide whether to commit to:
  - **2 hours per week** (often on Fridays, in addition to other rotations)
  - **1.5 day per week** (as a Secondary rotation).
- Develop a **meeting schedule with your identified Research Mentor** and/or Dr. Hilgeman to discuss progress toward your identified goals (e.g., once a month or more frequently).
- **Develop a research “product”** such as an abstract submission/presentation/poster for a local, regional, or national conference; a manuscript submission; a drafted grant application; or a case study report for publication. A presentation of your research to your peers and TVAMC training committee is also encouraged through coordination with the Training Director (i.e., as part of the didactics schedule in the spring/summer).

### **Examples of Recent Interns’ Research Rotation Activities:**

1. **Dr. Steven Sanders** (Psychology Intern, 2021-2022); Current tenure-track assistant professor at Oregon State University
  - a. Research rotation selected: Approx. 12 hours per week for 6 months.
  - b. Submitted a manuscript to journal.
  - c. **Sanders, S.M., Berry, A. T., Hollingsworth, D.W.** (Under Review). *Exploring the psychological inflexibility-psychological distress relationship in Black veterans.*

2. **Dr. Brian Clawson** (Psychology Intern, 2021-2022); Current Neuropsychology Postdoc at Loma Linda VA Medical Center
  - a. Research rotation selected: 2-hour per week rotation for 3 months.
  - b. Submitted an abstract to a national conference using data from an ongoing study, developed a poster and presented it at a virtual conference.
  - c. **Clawson, B.R.**, Block, P.R., Durkin, D.W., Collins, A., Jacobs, L., Hilgeman, M.M. (2021, November). *Measuring mindfulness: Assessing the utility of the FFMQ in older Veterans with dementia and their caregivers*. Late breaker poster submission at the 2021 Gerontological Society of America's Annual Scientific Meeting, Phoenix, Arizona. (Virtual.)
3. **Dr. Phoebe Block** (Psychology Intern 2019-2020); Current Psychologist at the Battle Creek VAMC in Michigan) & **Dr. Natalie Rieder** (Psychology Intern 2019-2020; Currently at St. Louis VAMC, MO).
  - a. Research rotation selected: 2-hour per week for first 6-months followed by a Secondary rotation for 6-months.
  - b. **Block, P.R.**, Loup, J.R., Collins, A.N., Gay, W.N., Snow, A.L., & Hilgeman, M.M. (2019, August). Examining pain in dementia: A comparison of pain ratings by veterans and their caregivers. Poster presentation at the 7<sup>th</sup> Annual Veterans Community Health Summit, Tuscaloosa, Alabama.
  - c. Loup, J.R., **Block, P.R.**, **Rieder, N.**, Alexander, K., Bishop, T.K., Snow, A.L., & Hilgeman, M.M. (2019, August). To Love and To Cherish, in Sickness and in Health: Investigating Veteran Spousal Relationships in the Context of Dementia. Poster presentation at the 7th Annual Veterans Community Health Summit, Tuscaloosa, Alabama.
  - d. Hilgeman, M.M., **Block, P.R.**, Bishop, T.K., Alexander, K., & Snow, A.L. (November 2019). *Adapting Mindfulness-Based Counseling for the Telephone: A Pilot Study for Caregivers and Veterans with Dementia*. In C. Gould & J. Loup (Co-Chairs) *Optimizing Veteran and Caregiver Well-Being Through Technology*. Paper submitted for presentation at the 2019 Gerontological Society of America Meeting, Austin, TX.
4. **Dr. Milli Boozer** (Psychology Intern 2017-2018; Current Neuropsychologist at Biloxi VAMC in Mississippi) contributed to a manuscript, completed reviews for a professional journal (Aging & Mental Health), and presented a poster presentation as a result of her Research Rotation:
  - a. Research rotation selected: 2-hour per week for 6-months.
  - b. **Hilgeman, M. M.**, Boozer, E. M.\*, Snow, A. L., Allen, R.S., & Davis, L. L. (2019). Use of the Montreal Cognitive Assessment (MoCA) in a Rural Outreach Program for Military Veterans. *Journal of Rural Social Sciences*. 34(2): Article 2. Available At: <https://egrove.olemiss.edu/jrss/vol34/iss2/2>
  - c. Hilgeman, M. M., **Boozer, E. M.**, & Davis, L. (2018). Use of the Montreal Cognitive Assessment (MoCA) in a Rural Outreach Program for Military Veterans. Poster presented at the 2018 Annual Conference of the National Academy of Neuropsychology, in New Orleans, LA.
5. **Dr. Kait Portz** (Psychology Intern 2017-2018; Current Staff Psychologist at Siteman Cancer Center, St. Louis, MO) assisted with launching a new LGBTQ+ Veteran health education

group at the Tuscaloosa VAMC; writing and submitting a VA Innovation Network Seed Award (that got funded for \$36K) to pilot the group at 2 VA facilities (Hampton VAMC & Tuscaloosa VAMC); deciding on the measurement strategy to evaluate the effectiveness of the new group; and writing up results from the pre-post-data for a manuscript and a conference presentation at APA's 2019 meeting. She also collaborated on the first LGBTQ+ Pride Month Event at the Tuscaloosa VAMC (in June 2018) – a panel discussion featuring Veterans who identify as LGBTQ+. This work was recognized by the TVAMC Director and was nominated for and received a **National ICARE Award for outstanding LGBTQ+ Service** its impact on LGBTQ+ Veteran patient care.

- a. Research rotation selected: 2-hours per week for 12-months.
- b. Lange, T.M., Hilgeman, M.M., **Portz, K.J.**, Intoccia, V.A., & Cramer, R.J. (2020). Pride in All Who Served: Development, Feasibility, and Initial Efficacy of a Health Education Group for LGBT Veterans. *Journal of Trauma & Dissociation, Special Issue on Trauma, Advocacy, and Social Movements*. Journal of Trauma & Dissociation, 21:4, 484-504, doi: 10.1080/15299732.2020.1770147
- c. Hilgeman, M.M., Lange-Altman, T., **Portz, K.J.**, Intoccia, V., & Cramer, R.J. (August, 2019) *"I still can't believe this group is at the VA": Pilot Data from an LGBT+ Health Education Group*. Poster presented at the Annual Scientific Meeting of the American Psychological Association in Chicago, Illinois.
- d. *Serving All Who Served: Improving Access to Healthcare for LGBT Veterans*; Veterans Affairs FY18 Innovators Network – Seed Grant funded by VA Office of Mental Health. Lange-Altman & Hilgeman (co-PIs), K. Portz Co-Investigator & Group Co-Facilitator for the Tuscaloosa VAMC.

“If you are interested in an academic career, or just want to learn more about research, this rotation offers a variety of opportunities to do so and the rotation played a major role in me securing my dream job in academia.”- Previous Intern

## DIDACTICS

Interns participate in weekly didactic seminars covering a broad array of topics important to developing as a psychologist. Didactic sessions are led by internship training faculty on a rotating basis and occasionally by guest presenters from other areas. Below is a non-exhaustive list of previous topics covered:

Academic Writing & Productivity  
Foundations of CBT  
Psychology Careers in Academia  
Microaggressions in Healthcare  
EPPP & Licensure Preparation  
Clinical Practice with LGBTQ+ Veterans  
Trans-Affirmative Care & Veteran Experience  
Healthcare Leadership in VA  
Telepsychology, Technology, & Ethics  
Psychology and Spirituality: Religious Influences in the Deep South

Other avenues for learning include attendance at additional seminars, lectures, team meetings, and case conferences held at the facility, in the community, and via web-based offerings (e.g., annual Mental Health Summit). Interns also have the opportunity to attend similar activities as they arise in the Psychology Department at the University of Alabama.

### **ADDITIONAL TRAINING AND ENRICHMENT OPPORTUNITIES**

In addition to planned rotation and didactic experiences, interns have the opportunity to participate in additional activities to augment clinical training. Recent opportunities have included community outreach at local events, shadowing in the facility's Neurology Clinic, development of group interventions (e.g., mindfulness workshop, LGBT+ support group, Genesis Psychosocial Rehabilitation groups), and participation in the VA Innovators Network.

#### **VA Innovators Network**

In 2016, the Tuscaloosa VAMC joined the Innovator's Network, a group of 33 medical centers that seek to create change from the frontlines up to the national level. As the needs of our Veterans are constantly changing, the Innovator's Network provides facilities with resources to anticipate and meet those needs. As a part of the Innovator's Network, frontline staff at TVAMC have access to the Spark-Seed-Spread Investment Program, which provides financial resources needed for innovative projects to be successful. One recent project – "Serving All Who Served: Improving Access to Healthcare for LGBT Veterans" – was initiated by an intern and has been featured in a VA Innovation Ecosystem podcast (<http://bit.ly/2t0T3GI>). We encourage interns to share and implement ideas that will help provide innovative care to our Veterans.

Internship faculty strive to be creative and flexible to meet interns' training needs and interests. Interns are strongly encouraged to communicate their personal and professional goals to training staff to facilitate involvement in the above activities or other adjunctive opportunities.

### **REQUIREMENTS FOR COMPLETION**

All VA doctoral internships are full-time, 12-month experiences. To successfully complete the program each intern must complete a total of 2080 hours (including accrued leave). Interns and supervisors develop specific training targets for each rotation and these targets must be consistent with the program's broader training goals, objectives, and expected competencies. Interns are provided with copies of all evaluation forms during orientation and supervision agreement forms, which includes the expectations regarding clinical competencies that are expected, as well as the minimum level of achievement. Upon completion of the program all interns will demonstrate competence in the nine APA profession-wide competency areas noted above.

The minimum level of achievement to graduate from the internship program is a rating of 4 on every applicable item on the evaluation form of the final rotations of the internship year (i.e., rotation ends in June) and successfully pass 3 clinical case presentations by the end of the internship year.

In addition to developing clinical competencies, maintaining good standing within the program also necessitates certain levels of professional behavior. Interns are expected to appear and conduct themselves as professionals. Veterans, families, staff, and fellow interns shall be treated with dignity and respect at all times. The APA ethical guidelines, HIPAA regulations, and VA



Privacy policies will be strictly adhered to, especially in matters of confidentiality of information, non-exploitation of patients, and avoiding conflicts of interest. Additionally, interns are responsible for conforming to all other Medical Center and Office of Personnel Management regulations concerning conduct and behavior.

## **FACILITY AND TRAINING RESOURCES**

### **RESOURCES AND BENEFITS**

Many resources are available as part of the training program. We enjoy a highly committed and accomplished psychology faculty and multidisciplinary colleagues who are actively involved in our training programs, contributing to a rich environment for interprofessional training, consultation, and leadership. Trainees can expect to have private office space during their training tenure. Networked laptop computers, equipped with the latest version of MS Office Professional, are provided in each office for patient care, word processing, and internet access for literature and other search services. Testing materials and reference resources are also provided for trainees' use.

**Financial Support.** The current intern annual stipend is \$33,469, to be paid in 26 bi-weekly installments. You must arrange to have pay deposited directly to your banking account. Checks are automatically deposited every other Friday.

**Health Insurance.** VA covers health care benefits for interns on a matching basis (i.e., trainees pay a portion of the premium for the insurance program and VA pays the other portion of the premium). Health insurance is also available for trainees' legally married partners and dependent children. Details of health insurance plans available to you will be presented by the Human Resources service during orientation and you can select the plan that works best for you.

**Work Hours.** Like most other Medical Center employees, interns work a 40-hour week with a typical workday (tour of duty) from 8:00 AM to 4:30 PM, with 30 minutes for lunch, resulting in an 8-hour day. Please plan to arrive and be present at your duty station ready to begin work at 8:00 AM.

**Leave.** Interns accrue four hours of annual leave (vacation) and sick leave per pay period, in the same manner as other Medical Center employees, for a total of 13 days of annual leave and 13 days of available sick leave during the year. In addition, interns receive 11 paid federal holidays.

### **ADMINISTRATIVE POLICIES AND PROCEDURES**



**Self Disclosure.** The Tuscaloosa VA Medical Center's Psychology Training Program does not require interns to disclose personal information in the context of their training unless the supervisor feels that such personal information is needed in order to evaluate or obtain assistance for a trainee whose personal problems are preventing them from performing professional activities competently or whose problems are posing a threat to the trainee or others.

**Due Process.** All trainees are afforded the right to due process in matters of problematic behavior and grievances. A due process document is distributed to every intern during orientation and reviewed in detail. A copy of our due process policy is available upon request.

**Privacy Policy.** We do not collect personal information about you when you visit our website.



## INTERNSHIP TRAINING FACULTY

	<p><b><u>Audrey Austin, Ph.D.</u></b> <b><u>Psychology Chief</u></b></p> <p><b>Undergraduate Degree:</b> A.B., Psychology, Princeton University</p> <p><b>Graduate Degree(s):</b> M.A., Ph.D., Clinical Psychology, University of Alabama; M.P.H., Health Policy &amp; Management, Emory University</p> <p><b>Internship/Residency:</b> Tuscaloosa VA Medical Center</p> <p><b>Clinical Interests:</b> Chronic Pain Management, Integrative Health, Healthy Aging</p> <p><b>Representative Publication(s):</b></p> <p>Ford, C., Gray, M., Crowther, M., Wadley, V., <b>Austin, A.</b>, Crowe, Pulley, L., Unverzagt, F., Kleindorfer, D., Kissela, B., &amp; Howard, V. (2021). Depressive symptoms and risk of stroke in a national cohort of black and white participants from REGARDS. <i>Neurology Clinical Practice</i>, 11(4) e454-e461.</p> <p>Vinson, L., Crowther, M., <b>Austin, A.</b>, &amp; Guin, S. (2014). African Americans, mental health, and aging. <i>Clinical Gerontologist</i>, 37, 4-17.</p>
	<p><b><u>Tony H. Cross, Ph.D.</u></b></p> <p><b>Undergraduate Degree:</b> B.S., Psychology, Georgia Southern University</p> <p><b>Graduate Degree(s):</b> M.A. &amp; Ph.D., Clinical Psychology, University of Alabama</p> <p><b>Internship/Residency:</b> VA Gulf Coast Veterans Health Care System</p> <p><b>Clinical Interests:</b> Primary Care-Mental Health Integration (PC-MHI), Chronic Pain</p>



**Michelle M. Hilgeman, Ph.D.**

**Undergraduate Degree:** BS, Psychology Major, Art Minor, Birmingham-Southern College

**Graduate Degree(s):** MS & PhD, Clinical Psychology, The University of Alabama

**Internship/Residency:** Boston Clinical Consortium, VA Boston Healthcare System, Boston University School of Medicine, & Harvard Medical School

**Clinical Interests:** implementation of evidence-based interventions, geropsychology, individuals with dementia and their caregivers, LGBTQ+ Veterans, health equity and access

**Representative Publication(s):**

**Hilgeman, M.M.,** Lange, T.M., Bishop, T., & Cramer, R.J. (2022). Spreading pride in all who served: A Health Education Program to improve access and mental health outcomes for sexual and gender minority veterans. *Psychological Services*.

**Hilgeman, M.M.,** Cramer, R.J., Hoch, M., Collins, A.N., Zabelski, A., & Heebner, N.R. (2022). A pilot study comparing two measures of perceived health services access among military veterans with musculoskeletal injuries and mental health conditions, *Military Medicine*.

**Hilgeman, M.M.,** Simons, K.V., Bower, E.S., Jacobs, M.L., Hagemann, L., Eichorst, M., Luci, K. (2021). Improving Suicide Risk Detection and Clinical Follow-up after Discharge from Nursing Homes. *Clinical Gerontologist*.

Palmer, J.A., **Hilgeman, M.M.,** Balboni, T., Paasche-Orlow, S., Sullivan, J.L. (2021). The spiritual experience of dementia from the health care provider perspective: Implications for intervention. *The Gerontologist*.

**Hilgeman, M. M.,** Boozer, E. M., Snow, A. L., Allen, R.S., & Davis, L. L. (2019). Use of the Montreal Cognitive Assessment (MoCA) in a Rural Outreach Program for Military Veterans. *Journal of Rural Social Sciences*. 34(2): Article 2.



**Vincent A. Intoccia, Psy.D.**

**Undergraduate Degree:** B.S. Psychology, Auburn University

**Graduate Degree(s):** M.A. Clinical Psychology, Western Kentucky University; Psy.D. Clinical Health Psychology, Spalding University



**Internship/Residency:** Vanderbilt University and Tennessee Valley VA Health Care System


**Clinical Interests:** Use of manualized exposure therapy to address anxiety disorders, specifically Prolonged Exposure Therapy to address PTSD. Broad interest in application of manualized evidence based psychotherapy (CBT-I, CBT-D, CBT-CP, ACT-CP). Special interest in the use of Acceptance and Commitment Therapy to treat mood and anxiety disorders.

**Representative Publication(s):**


Blashfield, R.K. & **Intoccia, V.A.** (2000). The Growth and Death of Personality Disorder Literature. *American Journal of Psychiatry*, 157 (3), pp. 472-473.



Lange, T., Hilgeman, M., Portz, K., **Intoccia, V.A.**, & Cramer, R. (2020). Pride In All That Served: Development, Feasibility, and Initial Efficacy of a Health Education Group for LGBT Veterans. *Journal of Trauma & Dissociation : The Official Journal of the International Society for the Study of Dissociation (ISSD)*, 21(4), 484–504. Vol. 21 (4) Pp 484-504.

	<p><b><u>David W. MacVicar, Ph.D.</u></b></p> <p><b>Undergraduate Degree:</b> B.A., Psychology, The University of Georgia</p> <p><b>Graduate Degree(s):</b> Ph.D., Clinical Psychology, The University of Montana</p> <p><b>Internship/Residency:</b> Naval Medical Center, Balboa, CA</p> <p><b>Clinical Interests:</b> Evidence-based psychotherapy relevant to treating Veterans with PTSD (prolonged exposure therapy, cognitive behavior therapy for insomnia, behavioral activation).</p> <p><b>Representative Publication(s):</b></p> <p>Schnurr, P.P, Chard, K.M., Ruzek, J.I., et. al., <b>MacVicar, D.W.</b> (2022). Comparison of Prolonged Exposure vs Cognitive Processing Therapy for Treatment of Posttraumatic Stress Disorder Among US Veterans A Randomized Clinical Trial. <i>JAMA Network Open</i>, 5(1).</p> <p>Davis, L.L., Mumba, M.N., Toscano, R., Pilkinton, P., Blansett, C.M., McCall, K., <b>MacVicar, D.W.</b>, &amp; Bartolucci, A. (2021) A Randomized Controlled trail Evaluating the Effectiveness of Supported Employment Integrated in Primary Care, <i>Psychiatric Services</i>.</p>
	<p><b><u>Martin Morthland, Ph.D.</u></b></p> <p><b>Undergraduate Degree:</b> B.A., The University of Alabama at Birmingham</p> <p><b>Graduate Degree(s):</b> M.S., Southern Illinois University of Edwardsville; M. Phil., The University of St. Andrews; Ph.D., The University of Alabama.</p> <p><b>Internship/Residency:</b> VA Maine (Togus)</p> <p><b>Clinical Interests:</b> Geropsychology, Treatment of Depression &amp; Anxiety for Older Adults; Capacity &amp; Cognitive Evaluations for Older Adults</p>

	<p><b>Representative Publication(s):</b></p> <p><b>Morthland, M.,</b> Shah, A., Meadows, J., &amp; Scogin, F. (2019). Development of an audio and computer cognitive behavioral therapy for depression in older adults. <i>Aging and Mental Health</i>.</p> <p>Shah, A., <b>Morthland, M.,</b> Scogin, F., Presnell, A., DiNapoli, E., DeCoster, J., &amp; Yang, X. (2018). Audio and computer cognitive behavioral therapy for depressive symptoms in older adults. <i>Behavior Therapy</i>, 49 (6), 904-916.</p> <p>Scogin, F., Bertoni, M., DiNapoli, E., Beutler, L., &amp; <b>Morthland, M.</b> (2018). Common and specific process variables in cognitive behavioral therapy with vulnerable older adults. <i>Journal of Psychotherapy Integration</i>, 28 (3), 292-309.</p>
	<p><b>Andrew Oakland, Ph.D.</b> <b><u>RRTP Program Manager</u></b></p> <p><b>Undergraduate Degree:</b> B.A., Psychology, Harvard University</p> <p><b>Graduate Degree(s):</b> M.A. &amp; Ph.D., Clinical Psychology, University of Nebraska</p> <p><b>Internship/Residency:</b> Tuscaloosa VA Medical Center</p> <p><b>Clinical Interests:</b> PTSD, Substance Use Disorder</p> <p><b>Representative Publication(s):</b> <b>Oakland, A. &amp; McChargue, D.</b> (2014). Polysubstance Use, Social Anxiety and Length of Treatment for Alcohol Use Disorders. <i>Journal of Dual Diagnosis</i>, 10(1), 3-8.</p>



	<p><b><u>Caitlin C. Retterer, Psy.D.</u></b></p> <p><b>Undergraduate Degree:</b> B.S., Psychology, Berry College</p> <p><b>Graduate Degree(s):</b> M.A. &amp; Psy.D., Regent University</p> <p><b>Internship/Residency:</b> Tuscaloosa VA Medical Center</p> <p><b>Clinical Interests:</b> PTSD, Depression, Anxiety, SUD</p> <p><b>Representative Publications/Presentations:</b></p> <p>Page, C., Jones, H., Burke, C., &amp; <b>Million, C.</b> (2015, September). Psychology and social justice: Advocating for a change? <i>Psych Discourse</i>, 49(2).</p> <p>Page, C., Jones, H., Burke, C., &amp; <b>Million, C.</b> (2015, May). <i>Psychology and social justice</i>. Paper presented at the 2015 Practitioner Scholar Conference of Hampton Roads, Virginia Beach, VA.</p> <p>Johnson, J., Brown, A., Heath, J., <b>Million, C.</b>, Wantke, A., Boyd, A., Channing, T., Kintzing, R., &amp; Phillips, J. (2015, April). <i>A single case study with replication of a health behavior change group</i>. Poster presentation at the Virginia Psychological Association (VPA) Spring Convention, Virginia Beach, VA.</p> <p>Dwiwardani, C., &amp; <b>Million, C.</b> (2014, April). <i>Cultural humility in practice</i>. Paper presented at Practitioner-Scholar Conference of Hampton Roads, Virginia Beach, VA.</p>
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	<p><b><u>Julie A. Woosley, Ph.D.</u></b></p> <p><b>Undergraduate Degree:</b> B.A., Psychology, Samford University</p> <p><b>Graduate Degree(s):</b> M.A. &amp; Ph.D., Clinical Psychology, The University of Alabama</p> <p><b>Internship/Residency:</b> Tuscaloosa VA Medical Center</p> <p><b>Clinical Interests:</b> sleep disorders, suicide, women's mental health, anxiety, and depressive disorders</p> <p><b>Representative Publication(s):</b></p> <p><b>Woosley, J. A., Lichstein, K. L., Taylor, D. J., Riedel, B. W., &amp; Bush, A. J. (2016).</b> Insomnia complaint vs. sleep diary parameters: Predictions of suicidal ideation. <i>Suicide and Life-Threatening Behavior</i>, <i>46</i>, 88-95.</p> <p><b>Woosley, J. A., Lichstein, K. L., Taylor, D. J., Riedel, B. W., &amp; Bush, A. J. (2014).</b> Hopelessness mediates the relation between insomnia and suicidal ideation. <i>Journal of Clinical Sleep Medicine</i>, <i>10</i>, 1223-30.</p> <p><b>Woosley, J. A., &amp; Lichstein, K. L. (2014).</b> Dysmenorrhea, the menstrual cycle, and sleep. <i>Behavioral Medicine</i>, <i>40</i>, 14-21.</p>
	<p><b><u>Adriana Yon, PhD, ABPP-CN</u></b></p> <p><b>Undergraduate Degree:</b> B.A., Psychology, University of Alabama</p> <p><b>Graduate Degree(s):</b> M.A. &amp; Ph.D., Clinical Psychology, University of Alabama</p> <p><b>Internship/Residency:</b> North Florida/South Georgia Veterans Health System</p> <p><b>Postdoctoral Fellowship:</b> G.V. (Sonny) Montgomery VA Medical Center (Clinical Neuropsychology)</p> <p><b>Clinical Interests:</b> Neuropsychology, Geropsychology</p> <p><b>Representative Publications/Presentations:</b></p>

	<p><b>Yon, A.,</b> Scogin, F., DiNapoli, E. A., McPherron, J., Arean, P. A., Bowman, D., Jamison, C. S., Karpe, J. A., Latour, D., Reynolds, C. F., Rohen, N., Pardini, J. E. L. and Thompson, L. W. (2014), Do Manualized Treatments for Depression Reduce Insomnia Symptoms? <i>Journal of Clinical Psychology</i>.</p> <p>Scogin, F., Fairchild, J. K., <b>Yon, A.</b>, Welsh, D. L., &amp; Presnell, A. (2013). Cognitive bibliotherapy and memory training for older adults with depressive symptoms. <i>Aging &amp; Mental Health</i>.</p> <p><b>Yon, A.,</b> Gordon, B. H., &amp; Bennett, T. (2011). <i>Symptom Validity Test and Personality Assessment Inventory Validity Scales: Base Rates of Failure in a Veteran Population</i>. Poster presented at the National Academy of Neuropsychology Conference, Marco Island, FL.</p>
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### **2023-2024 Interns**

Gabriele Mamone (Kansas City University), Jason Koch (Indiana University of Pennsylvania), and Ashley Pate (Mississippi State University)





## LOCAL INFORMATION

The Tuscaloosa VA Medical Center (TVAMC) is a teaching hospital affiliated with the University of Alabama (both at Tuscaloosa and Birmingham) and shares training programs in psychiatry, optometry, clinical pharmacy, and social work. The facility includes the main medical center complex situated on a beautiful campus of 125 acres with 25 major buildings, as well as a community-based outpatient healthcare clinic located in Selma, AL. The TVAMC is part of Veterans Integrated Service Network (VISN) 7 which also includes the Birmingham VA, Central AL Veterans Health Care System, Atlanta VA, Dublin VA, Charleston VA, and the Columbia VA.

TVAMC is located in a thriving riverside community of nearly 100,000 residents in west-central Alabama, about 60 miles southwest of Birmingham (metro population of 1.1 million). TVAMC employees and interns who desire a more “city living” experience, make the short commute from Birmingham to Tuscaloosa. Residents of Tuscaloosa get to enjoy the short drive to many major cities (e.g., Atlanta, New Orleans, Nashville), while also getting to enjoy a more affordable experience by living in Tuscaloosa. The city of Tuscaloosa takes its name from the Choctaw Indian Chief "Tushka Lusa" (tushka meaning "warrior", lusa meaning "black"). The Black Warrior River, which runs through the town, also has strong ties to indigenous Native Americans. The city has emerged as one of America's most progressive communities and was named the Most Livable City in America at the 2011 Conference of Mayors. Tuscaloosa has a strong sense of history, culture, community, and resiliency, demonstrated most powerfully by continued growth following recovery from the April 2011 tornado outbreak.



Summers are hot in Tuscaloosa, but the weather is mild for most of the year. The hot summers also make a great opportunity for a short drive to many of the Gulf Coast beaches. Interns who enjoy the outdoors will find numerous opportunities for recreation, including biking, hiking, sports or simply lounging in a hammock in the many acres of green space maintained by the Tuscaloosa County parks and recreation service. The Black Warrior River, Lake Tuscaloosa, Lake Nicol, Lake Harris, and other nearby lakes provide opportunities for paddle boarding, kayaking, and additional water-based activities. Those who prefer indoor pursuits will find a variety of restaurants, bars, local breweries, and cultural activities to keep them busy when not on duty. The city's Riverfront and Downtown areas have expanded following a multimillion-dollar reinvestment. The area is home to the 7,470 seat Tuscaloosa Amphitheater and a vibrant entertainment district.





There's no better place to be than in Tuscaloosa during college football season! Tuscaloosa is home to the University of Alabama, which has numerous strong collegiate athletic programs – Roll Tide! – that have accumulated numerous National Championship titles. In addition to sports, the university sponsors many cultural events including live theater, dance, and musical performances. The campus also houses several museums

and galleries including the Sarah Moody Art Gallery, the Paul “Bear” Bryant museum, and the Alabama Museum of Natural History. In downtown Tuscaloosa, the university hosts the Paul R. Jones Gallery of American Art, one of the largest collections of African American art in the world. There is a strong off-campus arts community as well, including the Bama Theater, Tuscaloosa Symphony Orchestra, Kentuck Arts Center, and several other galleries and performance venues.

We hope you are able to interview to learn more about TVAMC and Tuscaloosa. In the meantime, explore [Visit Tuscaloosa - The Official Guide to Tuscaloosa and Northport](#) as well as the “Live Here” and “Play Here” links at [The Chamber of Commerce of West Alabama | Tuscaloosa, AL \(westalabamachamber.com\)](#) for more information about the local area.

